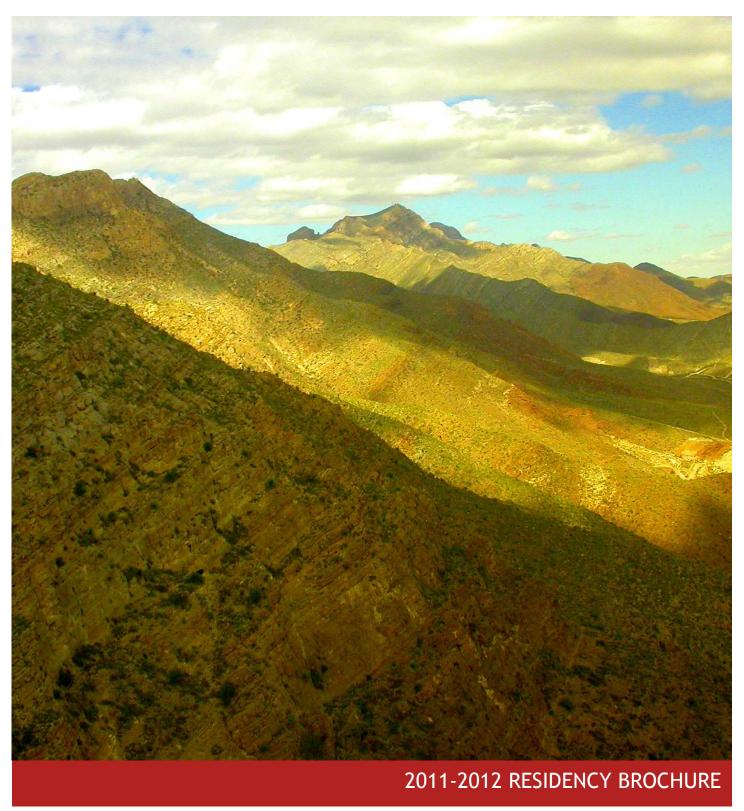
# WILLIAM BEAUMONT ARMY MEDICAL CENTER TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

# Orthopaedic Surgery



### WBAMC/TTUHSC ORTHOPAEDICS





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## 2011-2012 Welcome to Orthopaedic Surgery

#### Message from the Program Director

The Department of Orthopaedic Surgery at William Beaumont Army Medical Center/Texas Tech University Health Sciences Center aims to excel in patient care, education, and research. The residency program is committed to a process of resident development in the pursuit of knowledge that leads to a path of lifelong learning. The orthopaedic faculty has developed a teaching program that includes a comprehensive basic science and clinical curriculum. All orthopaedic subspecialties are well represented within the Department.

Attending surgeons are based at the Army hospital and the University Medical Center of El Paso. Research is expected and encouraged. The program fully meets all requirements established by the American Board of Orthopaedic Surgery and the Orthopaedic Residency Review Committee. The residency program allows sufficient latitude for independent maturation. Residents are expected to assume responsibility for their personal and professional development and to contribute to collegial growth.

You are invited to review our pamphlet of information and associated links in order to gain further insight into the educational and clinical services provided by our orthopaedic surgery residency program. Please contact the Orthopaedic Surgery Residency Program Coordinator Ms. Gale Rollins at <a href="mailto:gale.rollins@us.army.mil">gale.rollins@us.army.mil</a> or (915) 742-2288 or myself at <a href="mailto:philip.belmont@us.army.mil">Philip.belmont@us.army.mil</a> to set up an elective rotation.

LTC Philip J. Belmont Jr, MD

#### Message from the Chief Resident

Welcome to the field of orthopaedic surgery. As you review residency-training options, we encourage you to consider our combined civilian/military program, which provides the unique opportunity to train at the University Medical Center of El Paso and William Beaumont Army Medical Center. We have an excellent group of 23 residents who continue to excel in all areas of residency. Our success in research and academics coupled with the excellent surgical training opportunities available at the only Level I trauma center for a 250-mile radius result in an unparalleled orthopaedic surgery residency program. While all military orthopaedic surgery residency programs will provide adequate training, I strongly believe we offer one of the most exceptional in military orthopaedic practice. We welcome you to take advantage of the opportunity to visit El Paso and experience our program for a week or two. We look forward to meeting you and sharing more about William Beaumont and your potential future in the Sun City.

CPT Brian R. Waterman, MD



## **Program Description**

The orthopaedic surgery residency program at WBAMC/TTUHSC is the only combined military and civilian orthopedic residency program in the country. Following graduation, residents receive diplomas from both WBAMC and TTUHSC. Military residents evaluate and treat a variety of patients, from civilian trauma and VA beneficiaries to the population of young, athletic soldiers. These soldiers, who essentially are engaged in physical activity at the same level as competitive collegiate and professional athletes, experience a unique set of orthopaedic pathology.

University Medical Center of El Paso is the only Level I trauma center in the surrounding 250 mile radius, serving 1.1 million people of west Texas and southern New Mexico. University Medical Center of El Paso is a 327 bed hospital with approximately 2,000 Level I trauma admissions per year. Of these admissions, more than half require orthopaedic surgical intervention. Under the expert guidance of attendings, orthopaedic surgery cases solely are covered by the residents in the program, as there are no orthopedic surgery fellowship positions at the hospital. This affords residents the opportunity to experience a large quantity and variety of cases. Residents will graduate from the program having seen and been actively involved in all aspects of orthopedic trauma surgery, from complex pelvis and acetabulum fractures to polytrauma patients with multiple orthopedic injuries. Call at University Medical Center is typically one in five, allowing residents to experience a broad exposure to all admitted traumas.

William Beaumont Army Medical Center is a 250 bed Level III trauma center nestled in the mountains centrally in El Paso. Currently plans are underway for the construction of a new hospital

campus located on East Ft. Bliss. The new hospital will accommodate the 34,000 active duty soldiers and dependents expected to be stationed at Ft. Bliss by 2013, making it one of the largest U.S. Army installations in the United States. Residents work closely with staff in a preceptorship model. Each resident completes clinical rotations in rotating three month blocks to include Hand & Upper Extremity, Adult Reconstruction, Foot and Ankle, Sports Medicine, Orthopaedic Trauma, Spinal Reconstruction, and Pediatric Orthopaedic Surgery. Other residency programs at the hospital include General Surgery, Internal Medicine, and Oral Maxillofacial Surgery.

#### **Away Rotations:**

Adult Reconstruction: Three months at Rush University.

Pediatric Orthopaedic Surgery: Four to six months at either University of Utah in Salt Lake City, UT or Shriners Hospital in Spokane, WA.

#### **Elective Rotations:**

Time is made available to residents interested in performing elective rotations away from the program. Residents in the past have completed rotations to include Orthopaedic Trauma at Rush University in Chicago; Musculoskeletal Oncology and Sports Medicine at El Paso Orthopaedic Surgery Group; Sports Medicine in Taos, NM and research electives, among others.

#### WBAMC/TTUHSC ORTHOPAEDICS

#### Academics:

Every Wednesday is dedicated to solidifying and advancing the residents' knowledge in musculoskeletal pathology and orthopaedic surgery. Academic Wednesdays typically begin with morning report and continue throughout the day with a series of lectures from upper level residents and staff members as well as from visiting professors, in addition to weekly journal club. These academic days are intended to complement the residents' at-home studying regimen, and reinforce their knowledge base for clinical application as well for annual in-training exams and the board exam which takes place after graduation. The average resident scores in the past several years on the Orthopaedic In-Training Exam (OITE), produced by the American Academy of Orthopaedic Surgeons (AAOS), have been in the upper 85<sup>th</sup> percentile, with some residents scoring well above the 90<sup>th</sup> percentile. In addition, the combined first time American Board of Orthopaedic Surgery (ABOS) Parts I and II Board Exam pass rate has been greater than 90% over the past five years.

#### **Fracture Clinic:**

The Fracture Clinic is run by PGY2 level residents every Tuesday and Thursday. This gives the PGY2 residents autonomy and continuity of care in seeing patients with various fractures, with the availability of attending orthopaedic surgeons and senior residents close by for support. Patients typically

reach the fracture clinic through referral from the ER or from the outlying clinics on Ft. Bliss. A large number of patients present with fractures that require operative fixation, and this allows the junior residents to discuss the patient with their staff and potentially take the patient to the operating room.

#### Research:

Residents work closely with staff and basic scientists at both Texas Tech University and University of Texas at El Paso (UTEP) to fulfill their research requirements. Currently, residents and staff are involved in more than 30 active research projects, from prospective, randomized clinical trials to a number of basic science research projects. There have been over 80 publications in peerreviewed journals written by residents and staff in the orthopaedic surgery department at WBAMC/TTUHSC in the past few years. In addition, there have been multiple poster and podium presentations at regional and national meetings, including several at the annual meeting of the American Academy of Orthopaedic Surgeons and the Society of Military Orthopaedic Surgeons. Residents are encouraged to participate in research during their residency, and most will leave the residency programs with several publications. Currently, the orthopaedic surgery residency program requires residents to have two publishable manuscripts prior to graduation.



### El Paso, TX



Paso, TX was named the safest city with a population over 500,000 in the United States in 2010 by CQ Press. El Paso is a large city with a diverse population and offers many cultural attractions.

Fort Bliss, home to the 1<sup>st</sup> Armored Division is one of the largest US Army installations in the country, and with the addition of five incoming brigades, continues to grow. The growing city affords ample job opportunity for spouses and family members of residents.

El Paso is a beautiful city located in west Texas on the border of southern New Mexico and Mexico. The average daily high temperature in the summer is 95 F and 57 F in the winter, with over 300 days of sunshine per year. El Paso is home to UTEP. The city of El Paso also plays host to the Sun Bowl every year which features a matchup between some of the best football teams in the nation. There is an abundance of fine dining all over El Paso, including the most authentic Mexican food you will find. The El Paso Diablos baseball team calls El Paso's northeast side of town home, and plays in a 20,000 seat stadium, which also entertains people each year with many other attraction. The Sunland Park Race Track in El Paso is one of the premier horse racing tracks in the country and home to 2009 Kentucky Derby winner "Mine That Bird."

El Paso also provides the opportunity to experience

and participate in the arts as well as other activities. El Paso is home to a wonderful symphony orchestra, as well as the Plaza Theater which will be hosting the musical "Wicked" in 2012. The Art Museum, Children's Science Museum as well as the El Paso Zoo provide the opportunity for local day trips and entertainment.

Outdoor activities are limitless in the sunshine of west Texas and southern New Mexico. White Sands National Monument offers a unique sledding experience that will not soon be forgotten. Carlsbad Caverns is located less than 150 miles away from El Paso. Less than a two-hour drive north into New Mexico and you are in the mountains of the Lincoln National Forest at nearly 10,000 feet elevation, ideal for hiking, camping, hunting, skiing and a daytrip for a picnic in the trees. Major cities of Tucson (350 miles west), Santa Fe, and Albuquerque (300 miles north) are available for weekend trips to experience more of the culture in the southwest United States.

The El Paso International airport offers daily flights to several cities including, Phoenix, Las Vegas, Los Angeles, San Diego, Denver and Dallas, all within two hours away.



### WBAMC/TTUHSC ORTHOPAEDICS SELECT PUBLICATIONS

#### Selected 2009-2011 Publications

Nuzzo MS, Posner M, Warme WJ, Medina F, Wicker R, Owens BD. Pull-out and Compression Strengths of Bioabsorbable Nails and Bioabsorbable Screws in the Fixation of Osteochondral Dissecans Lesions of the Knee. Am J Orthop 2011;40: E61-E63.

Cooper W, Machen MS, Nelson J, Owens BD. Anterior cruciate ligament revision of a relatively new implant system. Orthopedics. 2009 May;32(5):326.

Owens BD, Dawson L, Burks R, Cameron K. The Incidence of Shoulder Dislocation in the United States Military: Demographic Considerations from a High-Risk Population. J Bone Joint Surg [Am] 2009;91:791-6.

Goodman GP, DeZee KJ, Burks R, Waterman BR, Belmont PJ Jr. Epidemiology of psychiatric disorders sustained by a U.S. Army brigade combat team during the Iraq War. Gen Hosp Psych. 2010.

Belmont PJ Jr, Goodman GP, Waterman BR, DeZee KJ, Burks R, Owens BD. Disease and Nonbattle injuries sustained by a U.S. Army Brigade Combat Team During Operation Iraqi Freedom. Mil Med. 175, 7:469.

Taylor DC, Posner M, Curl WW, Feagin JA. Isolated tears of the anterior cruciate ligament: over 30-year follow-up of patients treated with arthrotomy and primary repair. Am J Sports Med 2009;37: 65-71.

Schoenfeld AJ, Goodman GP, Belmont PJ Jr. Characterization of combat-related spinal injuries sustained by a US Army Brigade Combat Team during Operation Iraqi Freedom. The Spine J. 2010.

Belmont PJ, Schoenfeld AJ, Goodman GP. Epidemiology of combat wounds in Operation Iraqi Freedom and Operation Enduring Freedom: orthopaedic burden of disease. J Surg Orthop Adv. 2010 Spring;19(1):2-7.

Belmont PJ Jr, Goodman GP, Zacchilli M, Posner M, Evans C, Owens BD. Incidence and epidemiology of combat injuries sustained during "the surge" portion of operation Iraqi Freedom by a U.S. Army brigade combat team. J Trauma. 2010 Jan;68(1):204-10.

Garcia EJ, Bear RR, Schoenfeld AJ, Owens BD. Treatment of osteochondral lesions of the talus with a biosynthetic scaffold: a report of four cases. J Bone Joint Surg Am. 2010 Jul 21;92(8):1774-9.

Todd MS, Lalliss S, Garcia EJ, DeBerardino TM, Cameron KL. The relationship between posterior tibial slope and anterior cruciate ligament injuries. Am J Sports Med. 2010 Jan;38(1):63-7.

Blank E, Lappan C, Belmont PJ Jr, Machen MS, Ficke J, Pope R, Owens BD. Early analysis of the United States Army's telemedicine orthopaedic consultation program. J Surg Orthop Adv. 2011 Spring;20(1):50-5.

Garcia EJ, Owens BD. Anatomic approach to reconstruction of the unstable acromioclavicular joint. Current Orthopaedic Practice. 21(1):43-48, January/February 2010.

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Belmont PJ Jr, Thomas D, Goodman GP, Schoenfeld AJ, Zacchilli M, Burks R, Owens BD. Combat Musculoskeletal Wounds in a U.S. Army Brigade Combat Team during Operation Iraqi Freedom. J Trauma. 2010.

Carey P, Owens BD. Insertional footprint anatomy of the pectoralis major tendon. Orthopedics. 2010 Jan;33(1):23.

Waterman BR, Schoenfeld AJ, Holland CA, Goodman GP, Belmont PJ, Jr. Burden of Musculoskeletal Disease and Nonbattle Nontraumatic Injury in Both War and Disaster Zones. J Surg Orthop Adv. 2011.

Banerjee R, Waterman B, Padalecki J, Robertson W. Management of distal clavicle fractures. J Am Acad Orthop Surg. 2011 Jul;19(7):392-401.

Waterman BR, Belmont PJ Jr, Owens BD. Patellar dislocation in the United States: Role of sex, age, race, and athletic participation. J Knee Surg. 2011.

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Waterman BR, Banerjee RG. Management of traumatic, ipsilateral hip, knee, and ankle instability. Am J Orthop. 2011.

Waterman BR, Waterman SM, McCoy AC, Cameron CD. Coccidioidal Osteomyelitis of the Patella. Orthopedics. 2010 Apr 16:271-273.

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Banerjee R, Waterman B, Nelson J. Reconstruction of Massive Midfoot Bone and Soft Tissue Loss as a Result of Blast Injury. J Foot Ankle Surg. 2010 Mar 27.

Zacchilli MA, Owens BD. Epidemiology of shoulder dislocations presenting to emergency departments in the United States. J Bone Joint Surg Am. 2010 Mar;92(3):542-9.

Pirela-Cruz MA, Scher DL. Exposure of distal radius fractures using a direct radial approach with mobilization of the superficial branch of the radial nerve. Tech Hand Up Extrem Surg. 2010 Dec;14(4):218-21.

Scher DL, Belmont PJ Jr, Owens BD. Case Report: Osteonecrosis of the Femoral Head after Hip Arthroscopy. Clin Orthop Relat Res. 2010 Feb 10.

Scher DL, Owens BD, Sturdivant RX, Wolf JM. Incidence of Joint Hypermobility Syndrome in a Military Population: Impact of Gender and Race. Clin Orthop Relat Res. 2009 Dec 4.

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Fowler J, Owens BD. Abdominal compartment syndrome after hip arthroscopy. Arthroscopy. 2010 Jan;26(1):128-30.

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Hansen U, Moniz M, Zubak J, Zambrano J, Bear R. Achilles tendon reconstruction after sural fasciocutaneous flap using Achilles tendon allograft with attached calcaneal bone block. J Foot Ankle Surg. 2010 Jan-Feb;49(1):86.e5-10.

Kanlic EM, Pinski SE, Verwiebe EG, Saller J, Smith WR.Acute morbidity and complications of thigh compartment syndrome: A report of 26 cases. Patient Saf Surg. 2010 Aug 19;4(1):13.

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